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Please type a plus sign (+)		U.S. Patent and 1	frademark Office;	PTO/SB/01 (03-01) through 10/31/2002. OMB 0651-003. U.S. DEPARTMENT OF COMMERCI S it contains a valid OMB control numbe					
<u> </u>	N FOR UTILITY OR	Attorney Docket Nu		r TRANS 3.0-037					
DESIGN PATENT APPLICATION		First Named Invento	Fjield						
		COMPLETE IF KNOWN							
(37 (	CFR 1.63)	Application Number	Not Yet As	signed					
X Declaration Submitted	i imig todionarge	Filing Date	Herewith	ewith					
with Initial OR		Group Art Unit	Not Yet As	Yet Assigned					
Filing	(37 CFR 1.16 (e)) required)	Examiner Name	Not Yet As	signed					
As a below named in	As a below named inventor, I hereby declare that:								
1	•		me						
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
names are listed below)	or the subject matter which is ca	amed and for which a par	ent is sought of	the invention entitled:					
ULTRASOUND TRANSDUCER UNIT AND PLANAR ULTRASOUND LENS									
JEHOLOGOND	HOWODOOLK OWN ARE	or entering of the or	00110 2211	•					
(Title of the Invention)									
the specification of which									
X is attached hereto									
OR									
was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application No. and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one									
country other than the United States of America, listed below and have also identified below, by checking the box, any foreign									
application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					
Number(s)	Country	(Madeir DD/TTTT)	Not Claimed						
		1							
1									

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

X

Additional inventors are being named on the





PTQ/SB/01 (03-01) Approved for use through 10/31/2002 OMB 0851-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Please type a plus sign (+) inside this box -Under the Esquerwook Regisals in Act of 1965, in persons we required to required to a collective of informalism orders it contains a valid OMB control continu **DECLARATION** — Utility or Design Patent Application POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transaut all diusiness in the Patent and Trademark Office connected therewith: Customer Number 000530 Customer Number OR Correspondence address below Direct all correspondence to or Bar Code Label Name Address ZIP City Fax Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Family Name or Surname Fjield Given Name Todd (first and middle [if any]) inventor's Date Signature US Shoreham NY Residence: City Country Citizenship Mailing 22 Huck Finn Lane Address: 11786 NY Shoreham Country ZIP City NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Family Name Given Name Harhen Edward Paul (first and middle [ff any]) or Surname 2001 inventor's 11 Edurar Signature US Duxbury MA Residence: City State Country Citizenship **M**ailing 67 Meeting House Road Address: MA 02332 Duxbury Country State City

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.





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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pap	erwork Reduction Act of 1995, no	persons are requir	ed to respo	nd to a	a collec	ction of Infor	nation	unless it contains a valid OMS control numbe	
	DECLARATIO	N — Utili	ity or	De	esiç	ın Pat	ent	Application	
POWER OF A	ATTORNEY: As a named inventual inventual inventual inventual in the Patent and Tradent	or, I hereby appoir nark Office connec	nt the follow sted therew	ving re vith: C	egiste Suston	red practition ner Number	ner(s) t 00053	to prosecute this application and to 0	
Direct all correspondence to: X Customer Number or Bar Code Label			*000530*				OR	Correspondence address below	
Name							<u></u> -		
Address									
City				Stat	te	-		ZIP	
Country	Country Telephone						Fax		
belief are be the like so m	elieved to be true; and further	r that these state or imprisonment	ements we t, or both,	ere ma under	ade v r 18 L	with the kno	owled	statements made on information and ge that willful false statements and that such willful false statements	
NAME OF S	NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor								
Given Name (first and mid	idle [if any])	Todd			Family Name Fjield or Surname			Fjield	
Inventor's Signature	July	Zill	?		Date 11/12/2001				
Residence: Ø	Shorenam fity	State	•••				ÜS		
Mailing Address: 22 Huck Finn Lane									
Shoreham NY state		ZIP	11786 P			Country			
NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor						en filed for this unsigned inventor			
Given Name (first and middle [if any])  Edward Paul			ı		Family Name Harhen			Harhen	
Inventor's Signature							Date		
Duxbury Residence: City State		MA State	Country			US Citizenship			
Mailing Address:									
City	Duxbury	MA State	ZIP	023	332		ntry		
X Additi	ional inventors are being named	on the 1	suppleme	ental A	dditio	nal Inventor	(s) she	et(s) PTO/SB/02A attached hereto.	



City





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DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1				
Name of Additional Joint Inventor, if any:			A petition		A petition h	has been filed for this unsigned inventor			
Given Name (first and middle [if and])			k David	ck David Family Name or Surname			Lopath		
Inventor's Signature	Hank	<u> </u>					Date 12 NOV 2001		
Selauket		NY State Co		Countr	Country			US Chizenship	
Mailing Address:	Mailing 125 Sheon Bastura Pond								
East Setauket city		NY 1 State ZiP		11	1733		Country		
Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])  Great and middle [if any])									
Inventor's Signature						Date			
Residence: City Sta		State	State Country		y			Citizenship	
Malling Address:									
City State Z		ZIP			Country				
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) Family Name or Surname									
Inventor's Signature						Date			
Residence: City State Country		y			Citizenship				
Mailing Address:									
City State			ZIP			Country			
Name of Additional Joint Inventor, if any:					A petition h	etition has been filed for this unsigned inventor			
Given Name Family Nam (first and middle [if any]) or Surname									
Inventor's Signature				Date		Date			
Residence: City State			Country			Citizenship			
Mailing Address:									

ZIP

State

Country